

04 NOV 2005 Attorney Docket No. RICE. 10002

COMBINED DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION

I hereby declare that:

the specification of which

is attached hereto

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PSYCHOMETRIC INSTRUMENTS AND METHODS FOR MOOD ANALYSIS, PSYCHOEDUCATION, MOOD HEALTH PROMOTION, MOOD HEALTH MAINTENANCE AND MOOD DISORDER THERAPY

OR			
	d on <u>September 26, 2003</u> 1 Number <u>PCT/AU03/01</u>		ication Number or PCT on (mm/dd/yyyy)(if
I hereby state that I have including the claims, as a			pove identified specification, and to above.
C.F.R. 1.56, including fo	or continuation-in-part ar ing date of the prior app	oplications, material inf	entability as defined in 37 formation which became all or PCT international filing
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.			
Prior Foreign		Foreign Filing	,
Application		Date	
Number(s)	Country	(mm/dd/yyyy)	Priority Claimed?
2002951772	AU	09/26/2002	✓ Yes ✓ No
			T Yes No
			Yes No
			TYCS T No
			Г Yes
·			Yes No
Additional foreign application numbers are listed on a supplemental priority data sheet attached			
hereto.			
nereto.	prication numbers are in	sted on a supplemental	priority data sneet attached

Combined Declaration and Power of Attorney For Utility or Design Patent Application

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I hereby appoint the attorneys and agents associated with the following PTO Customer Number of Hutchison & Mason PLLC to prosecute the application identified above and to transact all business in the United States Patent and Trademark Office connected therewith:

Address all correspondence to:

Customer Number:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. FULL NAME OF SOLE OR FIRST Anthony Durrell **INVENTOR** Signature Date

Residence (City, State, Country) Sydney, New South Wales, Australia Citizenship Australian Suite 701, Level 7, BMA House Mailing Address 135 Macquarie Street City, State, ZIP, Country Sydney, New South Wales, 2000, Australia FULL NAME OF SECOND INVENTOR Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country **FULL NAME OF THIRD INVENTOR** Signature Date Residence (City, State, Country) Citizenship

Mailing Address